1: Ammar E, I-5 (1951) 1954
MR13 Fellahin MR13
Silwa

sickness is a pious deed. It is often told to a sick person that holy people have suffered from one ailment or another and have endured it willingly for God.

All this shows how the villagers' traditional notions about health and sickness are mixed with magical and religious beliefs; God is the afflicter as well as the healer; it is He who has fixed the life span of every person, and this cannot be lengthened or precipitated by a second, much less a minute, unless He wills it. Together with this, there is the belief that hope and propitiation cannot fail to produce some expected results in certain crises of life.

The village has experienced some measure of direct contact with modern medicine as a result of the establishment of a health unit by the Ministry of Health in 1936. This health unit is a wonderful building, situated on the southern border of the village, and is composed of a maternity section, an isolation ward, and a general section. It cost the Government about £E3,000, yet it has never functioned properly or systematically as doctors who came to it could hardly endure life in the village for more than six months, whereupon they tried every possible means to be transferred to towns. The villagers appreciated the health unit at the beginning, but their resentment to it was ironically aroused during the malaria and typhoid epidemic of 1943 on the grounds that sick people were taken away to the isolation ward, and dying away from one's relatives and home is the worst thing that can happen to any person. Their hostility towards it is expressed with reference to its unfortunate location, it being near the cemetery; thus going to the health unit has become psychologically a bad omen. However, the establishment of the health unit has given folk-medicine the greatest challenge, and at present the villagers are becoming increasingly interested in medicine as such, alongside their usual traditional cures. In serious cases the doctor's help is usually sought besides the traditional cures, and it is becoming a sign of social prestige to bring him into the home of the sick; but remaining in hospital for treatment or isolation for contagious diseases is still resisted.

Although one finds that the villagers have adopted certain items of material culture from the town, such as the use of manufactured goods, new types of vegetables, and some medicines, such adoption is a surface substitution. Their ideas about land ownership, the importance of children, family and clan solidarity, categories of respect relationships, sex dichotomy, supernatural sanctions, and the importance of ritual and ceremony in both social and religious life, remain almost unaltered.

There is, however, one feature in the village's social life that has undergone a certain amount of change as a result of changes in the economic conditions, and that is the role and function of leadership. Till very recently leadership has been mainly connected with families owning large plots of land; and such families assumed the responsibility and obligation for receiving guests from outside the village, providing hospitality for

2: Blackman E-5 (1920-1926) 1927
MR13 Fellahin MR13
Upper Egypt

THE FELLĀḤĪN OF UPPER EGYPT

Numbers of these prophylactics may be seen hanging from the necks of the hapless infants.

The various primitive medicinal remedies, well known to, and used by, all village matrons, are of such a nature that one wonders how any child manages to survive at all. Most of the women have a deeply rooted objection to going to a doctor for advice, supposing one to be available in the neighbourhood ; and I have found it hard work to overcome this prejudice, even in the case of people who know me well and who have every confidence in me. It is encouraging to hear that the Egyptian Government has recently allocated a certain sum of money for the purpose of starting baby-welfare centres. If only these institutions can be got into good working order, and can be utilized for the purpose of training young girls in the proper care and management of children, it will be a big step in the right direction, will ensure a much stronger and healthier peasantry, and will put an end to a vast amount of unnecessary suffering. During the years I have lived among these people I have had hundreds of sick children of all ages brought to me, and it has been heartbreaking to realize, as having had no medical training I inevitably must, that I am quite incapable of dealing with the terrible diseases from which they are often suffering. As will be seen in some of the subsequent chapters, a great deal of this sickness is due to superstition—taboos against washing, for instance, being very strict.

Much good has, of course, been done by the dispensaries, which in the past were run by Englishwomen ; but they are naturally limited in number, and the mothers will often defer taking their children there for advice and medicine till it is almost too late, or, at any rate, till the child has become very ill indeed. I myself had the privilege of seeing something of what was accomplished by an English lady at one of these dispensaries during the first three or four years that I resided in Egypt. I can bear witness to the splendid work she did, and I know how much she was loved and respected by the hundreds of poor women who brought their children to her for treatment. I am sure, from what I have heard of similar institutions in other parts of the country, that the same good work has been done by many others in the different provinces. The number of these dispensaries is not great enough to meet the crying need, and those that do exist have to be supported by funds from the Government, for they receive practically no support, so

2: Blackman E-5 (1920-1926) 1927
MR13 Fellahin MR13
Upper Egypt

far as I know, from private individuals. It is very different in England, where the hospitals for children and adults alike are supported by voluntary contributions. It is not that charity is lacking in Egypt—far from it; but for *organized* charity such as we have in England there is a crying need.

It is not altogether surprising, considering the state of ignorance in which they exist, that the mental outlook of most of the villagers is low. As far as the women are concerned, there is nothing to raise it. Sexual matters form the chief topic of their conversation, and this has a most degrading effect both on them and on their children, before whom they discuss the most private matters without the slightest reserve. Thus the children from their very early years hear subjects spoken of and joked about in a manner that is most revolting to educated people. What chance have the children in such circumstances of growing up into pure-minded men and women? I am told (for such conversation rarely takes place in my presence) that the women are far greater offenders in this respect than the men, who usually refrain from discussing their wives with outsiders. Whether this is true or not I am not in a position to say, but at any rate the children, and especially the girls, who are more constantly with their mothers than the boys, hear the most private sexual matters openly discussed, and in such a way as to poison their minds at the very outset of their lives. Marriage is, of course, the one and only aim in life among the girls, and the desire to get a husband is encouraged in every way by the mothers. It is quite a pitiful sight to see a little girl decked out in all the jewellery she can muster, dressed in a gaily coloured frock decorated with beads and jangles (Fig. 17), and with a veil drawn coquettishly across her face, standing about the village street, or outside the house, obviously on the look-out to attract some man. In all this they are aided and abetted by their mothers, who regard it as a compliment to themselves as well as to their daughters if the latter are sought after as wives at an early age. The Egyptian Government is endeavouring to prohibit the very early marriages which have been usual in the past, and there is now a law forbidding a girl to marry till she is sixteen and a boy till he is eighteen. However, in small, out-of-the-way villages the law has been disobeyed to my certain knowledge in more than one case. False ages were, I suppose, given to the *ḳāḍi*, as the man who draws up the marriage contracts is called; and he, in view of the fee he

2: Blackman E-5 (1920-1926) 1927
MR13 Fellahin MR13
Upper Egypt

case of bad skin disease has been alleviated by application of boracic cream! Cascara also is largely in demand, and it is no exaggeration to say that I give away hundreds of these tabloids every year. Cases of fever likewise have recovered rapidly with judiciously administered doses of aspirin or quinine. This practice of mine has earned for me the name of the Sheikheh Shifā (the Sheikheh of Healing), and it is a title which I much appreciate and

FIG. 130. COW BRANDED AS A CURE FOR PAIN IN THE LEG

value, however undeserved it may be. I have been much touched by the gratitude shown me by many of my poor patients, and in some parts of Egypt there have been occasions when I have treated over a hundred of them a day (Fig. 131). It brings me into close touch with the people, and gives me opportunities of talking to the women about keeping their children clean and impressing on them the value of soap and water. I now make it a rule never to give medicine for any child who is brought to me in a dirty state. The mother has to go home and wash it first, and then bring it to me again. I am glad to say that they nearly always return with a very much cleaner infant.

Greater facilities for providing the peasants with adequate medical treatment are urgently needed in Egypt at the present

2: Blackman E-5 (1920-1926) 1927
MR13 Fellahin MR13
Upper Egypt

time, and it is most encouraging to hear that the Government is now setting aside certain sums of money with a view to erecting more hospitals. Such a scheme deserves every encouragement and support.

FIG. 131. SOME OF MY PATIENTS

743 Special hospitals have been established to fight against
744 the three diseases in every *bandar*, or provincial capital.
164 These, however, can only treat patients from the immediate neighbourhood. It is difficult for others to leave their villages, in which there are no hospital facilities. If they all went to the *markaz*, the Government doctor and his pharmacy would be overwhelmed.

You may tell a sick man that he has no excuse. The towns are full of hospitals; there is free medicine at the dispensaries, and any number of doctors available.

"Yes", he will reply, "but there is no doctor in my village. And if there were, I could not afford to pay him any more than to buy medicine. As for going away to hospital, I cannot leave my wife and children. And how should I live while I am away? Where should I find money to pay for my food and lodging? I prefer to trust in Providence"(44).

A friend of the author's who is an *omda* gives a different view. "In the old days a sick fellah had to ride for three hours on donkey-back to get to hospital, whatever his condition. Now we have built a free dispensary in the village itself. A doctor comes four times a week, and when he is away he can be called by telephone. In this way treatment has become easier."

759 If the fellaheen go to the barber for treatment (till
744 they die of it), this is because he is the only available practi-
743 tioner, just as the money-lender is the only available source of loans. The proof is that, when the mobile medical services arrive in a village, the fellaheen come eagerly for help and submit with unflinching confidence to any sort of treatment.

743 Take for example the travelling hospital at Tahta. The
744 Ministry of Public Health rented a site for six months, and
164 tents were set up by the Department of Epidemic Diseases. Everything was clean. Before the opening day a publicity campaign was carried out in the surrounding villages, and a ceremonial opening was arranged. One doctor and six assistants were at the disposal of the patients, who were treated free. The average attendance was eighty a day, of whom twenty-five had hookworm and only three had bilharzia (this was Upper Egypt). But these splendid efforts on the part of the Ministry of Public Health are no more than a drop in the ocean. Unfortunately, the fellah's

own habits often neutralise the treatment he receives, so 743 ●
that these diseases remain as deep-rooted as ever in the 744
peasant class.' If only they would pay attention, until 164
more can be done, to the advice and directions which are
given them! The answer is that even if they tried they could
not hope to succeed, because the conditions under which they
live are at every point unfavourable to the attempt. Here
lies the heart of the problem.

(4) *Food and Drink*

Water is the first problem; not this time considered for 271
its use in irrigation, which has been studied over and over [132]
again, but as a much more vital need in supplying human
nourishment. Egypt is a hot country, and the fellah's
work makes him sweat, so that thirst affects him more than
most other people.

Where the owner of an *'ezba* has installed a pump, the 271
fellaheen may get their water from an artesian well. If 312
their village is on the river bank, they will use water from
the Nile, which is silty but fresh-running. But more often
than not they can drink only brackish and stagnant water
from the irrigation canals.

In these, men and animals cleanse and relieve them- [296
selves; vegetables, clothes, and crockery are washed, and [515
carrion is thrown away: and this is the place to which women 364]
come to get "drinking water". They bring it home in the
early evening, in their ewers or tins, to fill up the great pot, 271
or *zir*, that stands against the house wall. Each fellaha 415
brings back about six gallons each evening for the next
day's use. This water she adds to what already remains in
the *zir*, so that the bottom is never dry, and never cleaned.
The water stands all night, so that some of the dirt settles.
It also cools, owing to evaporation through the porous clay.
As for the drops which filter through, and which might be used
to fill the drinking-pots with pure water for the morning,
they simply run to waste in puddles or are drunk by the fowls.

The Government, however, is busily studying the question
of supplying drinking-water to the villages, and numerous
plans have been made.

Men have always added something to water to give it a 273
taste. The fellah is no exception. Wine he does not drink,

expense, which amounts to about L.E. 70. These *gallabiyas* are not distributed anyhow, but fitted individually by the *nâzer's* wife, according to height and taste. At the Bairam festival there is a general distribution of meat, four pounds to a person, which costs about L.E. 40. Fat is also given to those who have no *gamoossa*. The fruit crop of the orchard is shared out at intervals. Whenever a child is born, a set of baby-clothes is provided.

When a fellah gets into debt, the *nâzer* advances him what he needs, without any trickery. The man pays it off by days of work.

Drinking-water is supplied to all from a pump at the entrance to the *'ezba*. A dozen lavatories and two shower-baths have been set up near the mosque.

This beautiful mosque, built by the Christian landowner, who also provides for an *imam*, brings together the menfolk of the *'ezba* and its surroundings. A *kuttab* was attached to it, but this has been closed since the opening of an *ilzamiya* school in the next village.

Fellaheen who go sick are cared for by the *nâzer*, who has by practice become something of a doctor, or sent to the Government doctor at Mit Ghamr. The wife of this kindly manager, when she was there, used to take care of the people herself, wash their eyes, and give them clothes and good habits too. For twenty-four years she stood at her husband's side.

When she died, they showed that fellaheen are not incapable of gratitude. They discovered by childish tricks, in spite of efforts to keep the truth from them, that she was seriously ill in Cairo. Thirty of them piled into a couple of taxis and drove off to the hospital. It was like a public demonstration, people said. Later, when they saw the *nâzer* and his children coming back in mourning from the cemetery, their grief was as spontaneous as it was general.

This mother left her daughter an example to follow. And follow it she does, with her gentleness and good temper and her mastery of Arabic. It is easy to see how much they love her, those unloved peasants.

This experiment in social justice has not made either the owner or the *nâzer* any the poorer. The estate is one of the most productive in Egypt, and all its products have won prizes at agricultural exhibitions.